

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
*Harold Hendrickson*  
*Student Mkt. Svc. LLC*  
*1405 Foulk Rd.*  
*Wilmington, DE.*  
*19803*

A. Signature  
*Deborah Pike* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *Deborah Pike* C. Date of Delivery *12/19*

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

*DEC 19 2005*

3. Service Type

☒ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number  
(Transfer from service label)

PS Form 3811, August 2000 **7002 0860 0000 1408 9634** 102595-02-M-1540